

CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

ESTABLISHED APRIL 15, 1870

BERTRAM P. BROWN, M.D., Director

Weekly Bulletin



STATE BOARD OF PUBLIC HEALTH

DR. A. ELMER BELT, Los Angeles, President

DR. F. M. POTTENGER, SR., Los Angeles, Vice President

DR. V. A. ROSSITER, Santa Ana

DR. NORMAN F. SPRAGUE, Los Angeles

DR. FRANK B. YOUNG, Long Beach

DR. CHARLES E. SMITH, San Francisco

DR. AMOS CHRISTIE, San Francisco

DR. BERTRAM P. BROWN, Sacramento

Executive Officer

SAN FRANCISCO

603 Phelan Building, 760 Market Street
Underhill 8700

SACRAMENTO

State Office Building, 10th and L Streets
2-4711

LOS ANGELES

State Office Building, 217 West First
Street MADison 1271

Entered as second-class matter February 21, 1922, at the post office at Sacramento, California, under the Act of August 24, 1912. Acceptance for mailing at special rate of postage provided for in Section 1103, Act of October 3, 1917.

Vol. XX, No. 8

March 15, 1941

GUY P. JONES
EDITOR

Tuberculosis From the Orient

Dr. J. C. Geiger, Director of the San Francisco Department of Public Health, and Dr. Ethel Owen of the same department have made an interesting study of tuberculosis in San Francisco Chinese boys who have visited or lived in China for several years, and in whom tuberculosis has been discovered shortly after their return to the United States. These boys are classified as American citizens who have been out of the country on a vacation, or they are the children of American-born Chinese born in China. No less than 26 Chinese children were removed from San Francisco schools during the first three months of 1940 because of clinically active tuberculosis. Many of the 26 had spent varying lengths of time in China. Following is the report as presented by Drs. Geiger and Owen:

"Even in normal times port cities are confronted with health problems of unique character. San Francisco always has had certain definite health problems in regard to travelers coming from the Orient. Recently, however, a new angle has developed. Early in 1940, X-rays of the positive reactors to tuberculin in the routine testing done in San Francisco schools showed an unusually large number of Chinese boys in junior high school with far advanced clinical tuberculosis.

For a period of 10 years past high school and junior high school children in this city have received tuberculin tests every year. The tests done are an intracutaneous Manteau of 1-to-1000 dilution. X-rays of the positive reactors are made and the negative

reactors are retested at regular intervals throughout their school life. The incidence of clinical tuberculosis and the mortality from the disease are all considerably higher in the Chinese population than for the rest of the city.

During the first three months of 1940, 26 Chinese children were removed from school because of clinically active tuberculosis. These were all far advanced cases; one had bilateral cavitation and none looked recent. An additional 12 cases are under observation. Many were found to have spent varying lengths of time in China. Of the 26, five were girls and 21 were boys, or rather, young men, since they are all much older than the usual junior high school age. The 12 cases under observation are all boys. The outstanding factors were the ages of these children. These ranged between 16 and 23. The average junior high school age in San Francisco is 12 or 13.

An investigation revealed that many of these boys had been recently admitted to the United States as American citizens or as children of American citizens without any kind of physical examination. All had been visitors to a district in or near Canton, China, where their time of residence varied from life to 10 years. The length of time after return to the United States varied from four months to two years. Therefore, it is evident that there has been in 1940, in San Francisco, a decided increase in the number of clinically active cases of tuberculosis among Chinese boys of junior high school grades.

Investigation has shown that Chinese have taken their sons with them to China. The boys have lived in the vicinity of Canton, China, under adverse public health conditions not found in the United States,

and more recently under actual war conditions. Wherever possible, Chinese have returned their sons to the safety of the United States. The boys are American citizens who are classified as merely having been away on a vacation, or in other cases, they are the children of American-born Chinese, born in China. In this situation lies a menace of tuberculosis, especially to the Chinese population of San Francisco. It would seem desirable to have an X-ray of the chest of all young Chinese returning to the United States after prolonged sojourn in China.

This is merely one age and one race group. The cost to San Francisco alone in three months for the care of these Chinese youths with active tuberculosis and the probable necessity of shortly caring for additional cases would justify taking every precaution at the port of debarkation by proper Federal authorities in order to limit further the spread of tuberculosis in the United States."

SANTA CLARA COUNTY ISSUES REPORT

Dr. C. M. Burchfiel, San Jose, Health Officer of Santa Clara County, has issued the annual report of his department for the calendar year 1940.

There were but 29 deaths from tuberculosis last year in the territory served by the Santa Clara County Health Department, bringing a low death rate of 34.2 per 1,000 population. During the year 85 per cent of all school children in the first four grades of 50 elementary schools were immunized against diphtheria and smallpox. During the year not a single case of smallpox occurred, and there were only three cases of diphtheria among individuals residing within the territory served. Two of these were in adults and one was in a child of preschool age. In 1928, before an immunization program was started in the schools, there were 146 cases of diphtheria reported.

The department conducts standard public health activities and accomplishes outstanding results in the maintenance of public health in Santa Clara County. The territory covered by this department constitutes the entire area of the county, with the exception of San Jose and Palo Alto. The population served is 89,182 out of a total population in the county of 174,367 (U. S. Census, 1940).

Let him who knows little, play safe, whatever his job, and even though he be not adjudged smart, he will be adjudged sound. He who knows much may take a chance, and let his imagination roam; but he who knows little, and takes chances, voluntarily tries suicide; keeps always to the right, for what is established as right can not be wrong; the king's highway is fixed for the simpleton, and this law for everybody, know he much, or know he little, that there is better sense in safety, than in singularity.

—Baltazar Gracian, 1653.

PASADENA HEALTH DEPARTMENT ISSUES REPORT

Under the title, "Health Happenings, 1940," the Pasadena Health Department, Dr. Wilton L. Halverson, Health Officer, has issued its annual report. Operating on a small budget, 60 cents per capita, it has been necessary to use the most efficient possible methods in conducting the work of the department. Nevertheless, the activities represent quantity, quality and diversity. The Works Progress Administration and the National Youth Administration, during the year, provided assistance in some activities. A tumor clinic for the diagnosis of malignant growths was conducted under qualified leadership. Efforts were made to provide the community with adequate nutrition services. An effective rodent control program was instituted during the year. The first annual community health photographic contest was carried out under the supervision of the department. Prizes totaling \$100 were provided by the milk industry. The contest constituted a novel method for directing attention to the importance of health. One of the most effective pieces of work accomplished by the Pasadena Health Department lies in its health educational program. Its publications, including the annual report, are attractively prepared and make a direct popular appeal. The report is provided with photographic illustrations as well as charts and graphs.

It is estimated that more than 60 per cent of the children of Pasadena below the age of 10 are protected against diphtheria. There was but one case of smallpox and one case of diphtheria in the city during 1940. No deaths from whooping cough occurred. There were 57 cases of scarlet fever with 2 deaths, and 82 reported cases of tuberculosis with 29 deaths.

DON'T PLAY WITH BLASTING CAPS

Last year 157 children in the United States were injured as a result of playing with blasting caps. Most of them were under the age of 16. The companies manufacturing commercial explosives are interested in safeguarding children from injuries with blasting caps, and have issued warnings against permitting them to fall into the hands of children. Individuals, including children, who are inexperienced with explosives should not touch a blasting cap. They should allow it to remain where found until an officer of the law or other responsible adult can be located. Most accidents of this type occur in the rural districts or in suburbs of the larger cities, generally through the carelessness of workmen who leave them following blasting operations and who sometimes carry them home, negligently leaving them

where children may find them. Most accidents of this type occur from striking the caps with a hammer or stone. Any such cap will explode if hit hard enough with such instruments. Picking at the explosive with a pin or nail may also cause injuries.

Blasting caps are detonators used for firing high explosives. One type is a small metal cylinder closed at one end, generally made of copper. This type is designed to be exploded by sparks from a fuse. Another type is a metallic cylinder of varying dimensions and color. It always has wires attached, sealed in with sulphur, rubber, or some other material, and a very small amount of electric current is sufficient to explode a single cap. Both types of caps are sensitive to impact with a hammer or stone, and to fire if applied to the metal cylinder. Children should be told not to play with blasting caps or to throw them in fires, and not to hit them with a hammer or other instrument. If discovered, blasting caps should be allowed to remain where found until an officer of the law or other responsible adult can be located.

RIGHT TO QUARANTINE TUBERCULOSIS

Earl Warren
Attorney General

STATE OF CALIFORNIA

Legal Department

San Francisco, March 17, 1941

Bertram P. Brown, M.D.
Director of Public Health
760 Market Street
San Francisco, California

DEAR SIR: I have before me your letter of March 8, 1941, in which you request my opinion upon the question of whether the Director of the Department of Public Health may request the health officers of the City of Marysville and the County of Yuba to quarantine an active case of tuberculosis.

It is expressly provided in Section 2558 of the Health and Safety Code that:

"Whenever in the judgment of the State department it is necessary for the protection or preservation of the public health, each health officer shall, when directed by the State department, do the following:

(a) Quarantine and disinfect persons, animals, houses or rooms, in accordance with general and specific instructions of the State department."

Pursuant to the authority thus conferred upon the State Department of Public Health, the director

thereof may direct the local health officers to quarantine an individual suffering from tuberculosis. The authority for quarantining such a person is found in Sections 2561 to 2563, inclusive, and Section 2571 of the Health and Safety Code.

The right to quarantine persons suffering from the diseases specified in Section 2571 has been sustained in the cases of

In re Johnson, 40 Cal. App. 242;

In re Culver, 187 Cal. 437;

In re Arata, 52 Cal. App. 380;

In re Travers, 48 Cal. App. 765.

Should the individual violate his quarantine, such violation will constitute a misdemeanor.

If I can be of further assistance to you in this matter, do not hesitate to call upon me.

Very truly yours,

EARL WARREN, Attorney General,

By (signed)

Thomas Coakley, Deputy

Public health education is not a water-tight compartment in the health program. It is an activity that permeates the whole health field. The sanitary engineer or the statistician usually has a well defined sphere of activity; not so the practicing health educator. And, supplementing his broad range of work there should be much of the health educator in all the other specialists of the health agency staff. The health officer is no longer the sanitary policeman of an earlier generation; if he is to fulfill his obligations, he should be a guide to his community in matters of health. The goal of the epidemiologist is not to enforce quarantine, but to teach people how to prevent the spread of infection. The sanitary inspector's chief purpose is not to catch the violator of the sanitary code, but to show the proprietor how to secure the best sanitary conditions through good management of his property. The public health nurse is essentially a teacher of health in the home.

PROF. IRA V. HISCOCK, Sc. D.

"*Ways to Community Health Education.*"

MORBIDITY

Complete Reports for Following Diseases for Week Ending March 8, 1941

Chickenpox

1245 cases: Alameda County 13, Alameda 1, Berkeley 9, Oakland 64, San Leandro 2, Chico 1, Contra Costa County 4, Pittsburg 2, Fresno County 36, Fresno 9, Sanger 3, Humboldt County 2, Arcata 1, Eureka 1, Imperial County 2, Calexico 1, El Centro 1, Kern County 30, Bakersfield 1, Delano 3, Los Angeles County 81, Alhambra 2, Burbank 10, Compton 3,

Culver City 2, El Segundo 6, Glendale 10, Hermosa 6, Huntington Park 4, Inglewood 32, Long Beach 6, Los Angeles 120, Manhattan 1, Montebello 2, Pasadena 16, Pomona 9, Redondo 1, San Fernando 5, Santa Monica 5, Whittier 4, Lynwood 1, South Gate 2, Maywood 1, Bell 2, Madera County 4, Chowchilla 2, Marin County 1, San Anselmo 10, Sausalito 2, Monterey County 7, Napa 2, Nevada County 1, Grass Valley 25, Orange County 35, Anaheim 47, Brea 2, Fullerton 10, Santa Ana 29, La Habra 1, Laguna Beach 1, Tustin 17, Placer County 23, Riverside County 3, Corona 2, Riverside 3, San Jacinto 1, Palm Springs 1, Sacramento 85, Ontario 22, San Bernardino 2, San Diego County 4, National City 6, San Diego 42, San Francisco 177, San Joaquin County 12, Lodi 6, Stockton 3, San Luis Obispo County 4, Paso Robles 16, San Luis Obispo 3, Burlingame 1, San Mateo 2, Atherton 1, San Carlos 3, Menlo Park 1, Santa Barbara County 2, Lompoc 1, Santa Barbara 5, Santa Maria 4, Santa Clara County 13, Palo Alto 7, San Jose 13, Santa Clara 1, Sunnyvale 5, Redding 1, Siskiyou County 7, Solano County 1, Vacaville 2, Stanislaus County 10, Modesto 3, Tulare County 10, Dinuba 4, Ventura County 3, Yolo County 2, Winters 3, Woodland 12.

Diphtheria

11 cases: San Leandro 11, Los Angeles County 2, Los Angeles 1, Corona 1, Riverside 1, San Francisco 1, San Jose 1, Ventura 2, Marysville 1.

German Measles

574 cases: Alameda County 15, Alameda 4, Berkeley 8, Livermore 3, Oakland 3, Pleasanton 1, Fresno County 7, Fresno 15, Kingsburg 3, Inyo County 3, Kern County 4, Susanville 2, Los Angeles County 23, Alhambra 2, Compton 9, El Segundo 1, Glendale 10, Huntington Park 3, Inglewood 1, Long Beach 132, Los Angeles 22, Pasadena 7, Pomona 1, San Marino 1, Santa Monica 5, South Pasadena 1, Lynwood 1, South Gate 3, Maywood 1, Carmel 1, Salinas 1, Napa County 2, Napa 30, Orange County 7, Anaheim 6, Fullerton 1, Santa Ana 3, Laguna Beach 7, Tustin 1, Riverside County 4, Elsinore 3, Perris 5, Sacramento 1, Hollister 1, San Diego County 3, Coronado 1, La Mesa 2, National City 14, Oceanside 1, San Diego 68, San Francisco 10, Stockton 1, San Luis Obispo County 3, San Luis Obispo 3, Burlingame 2, San Mateo 1, Menlo Park 9, Santa Barbara County 1, Santa Barbara 2, Santa Clara County 10, San Jose 10, Santa Clara 1, Shasta County 2, Redding 3, Siskiyou County 2, Solano County 3, Tulare County 1, Dinuba 1, Davis 1, Yuba County 1.

Influenza

413 cases: Oroville 2, Kern County 185, Bakersfield 1, Los Angeles County 23, Alhambra 6, Compton 3, El Monte 2, Glendale 1, Long Beach 4, Los Angeles 36, San Gabriel 1, Whittier 1, Monterey County 3, Napa 1, Placer County 33, Palm Springs 1, Sacramento 3, San Diego 1, San Francisco 1, San Joaquin County 1, Stockton 2, Palo Alto 1, San Jose 3, Shasta County 1.

Measles

246 cases: Alameda 1, Berkeley 1, Hayward 1, Oakland 3, San Leandro 1, El Dorado County 1, Fresno County 4, Inyo County 3, Kern County 6, Los Angeles County 7, Avalon 2, Glendale 1, Inglewood 3, Long Beach 2, Los Angeles 32, Monrovia 1, Pomona 1, San Gabriel 1, Lynwood 1, Monterey Park 1, Modoc County 2, Alturas 1, Monterey County 8, Monterey 1, Salinas 4, Napa 3, Nevada County 2, Grass Valley 6, Anaheim 1, Orange 2, Banning 2, Riverside 2, Indio 2, Sacramento 2, Redlands 2, San Bernardino 1, Chula Vista 6, Coronado 2, San Diego 6, San Francisco 6, San Luis Obispo County 1, Burlingame 2, San Mateo 1, Menlo Park 1, Santa Barbara County 1, Sunnyvale 1, Santa Cruz 5, Shasta County 10, Redding 7, Siskiyou County 4, Solano County 1, Vacaville 9, Sutter County 1, Tulare County 2, Oxnard 1, California 4.*

Mumps

683 cases: Alameda County 3, Alameda 4, Oakland 10, San Leandro 1, Martinez 3, Fresno County 1, Clovis 1, Fresno 2, Reedley 3, Inyo County 8, Kern County 12, Delano 4, Lemoore 1, Los Angeles County 100, Alhambra 2, El Segundo 1, Glendale 16, Inglewood 4, Long Beach 20, Los Angeles 71, Monrovia 4, Montebello 11, Pasadena 1, Pomona 12, Redondo 1, San Gabriel 7, Santa Monica 1, Lynwood 2, Hawthorne 1, South Gate 2, Maywood 1, Gardena 5, Sausalito 1, Nevada County 1, Grass Valley 15, Orange County 19, Anaheim 2, Huntington Beach 6, Newport Beach 4, La Habra 22, Riverside County 1, Corona 4, Riverside 1, San Jacinto 4, Indio 1, Sacramento 9, Ontario 2, San Bernardino 2, San Diego County 5, La Mesa 15, San Diego 32, San Francisco 36, San Mateo 1, Santa Barbara County 4, Santa Barbara 5, Santa Clara County 1, San Jose 8, Shasta County 5, Redding 13, Siskiyou County 4, Solano County 28, Vacaville 7, Stanislaus County 16, Corning 1, Trinity County 47, Tulare County 4, Dinuba 4, Ventura County 8, Santa Paula 2, Ventura 2, Ojai 2, Winters 16, California 4.*

Pneumonia (Lobar)

70 cases: Brawley 1, Los Angeles County 8, Alhambra 1, Burbank 1, Glendale 3, Long Beach 3, Los Angeles 17, San

Fernando 1, Santa Ana 1, Riverside 1, Sacramento County 4, Sacramento 5, North Sacramento 1, San Diego 7, San Francisco 7, San Joaquin County 1, Stockton 1, Burlingame 1, Santa Clara County 1, Mountain View 1, San Jose 1, Shasta County 1, Santa Paula 1, California 1.*

Scarlet Fever

108 cases: Berkeley 1, Oakland 3, San Leandro 2, Contra Costa County 1, Martinez 2, El Dorado County 1, Clovis 2, Fresno 2, Selma 1, Arcata 1, Kern County 6, Los Angeles County 7, Alhambra 2, Burbank 1, Glendale 3, Huntington Park 1, Long Beach 3, Los Angeles 30, Monrovia 2, Pasadena 2, San Fernando 1, South Gate 1, Riverside County 1, Perris 1, Indio 2, Sacramento 3, San Bernardino 1, San Diego 5, San Francisco 7, Stockton 1, San Luis Obispo County 1, Redwood City 1, Santa Barbara 1, San Jose 1, Sunnyvale 1, Sutter County 2, Tulare County 2, Ventura County 1.

Smallpox

No cases reported.

Typhoid Fever

5 cases: Kern County 2, Santa Monica 1, Ceres 1, California 1.*

Whooping Cough

404 cases: Alameda County 7, Alameda 9, Berkeley 19, Livermore 2, Oakland 19, Pleasanton 3, San Leandro 1, Contra Costa County 2, Concord 12, Martinez 1, Fresno County 4, Clovis 1, Fresno 1, Reedley 1, Glenn County 4, Orland 6, Calexico 5, Kern County 3, Los Angeles County 36, Alhambra 1, Burbank 3, El Segundo 1, Huntington Park 2, Inglewood 16, Long Beach 10, Los Angeles 34, Monrovia 1, Pasadena 5, Pomona 4, Santa Monica 6, Whittier 2, South Gate 1, Maywood 3, Merced County 1, Monterey County 6, Napa 7, Orange County 15, Brea 7, Fullerton 2, Huntington Beach 2, Newport Beach 2, Orange 1, Seal Beach 4, Laguna Beach 3, Riverside County 2, Sacramento 4, San Bernardino 9, Chula Vista 3, San Diego 24, San Francisco 46, San Joaquin County 3, Lodi 4, Stockton 3, San Luis Obispo 6, South San Francisco 1, Santa Barbara County 3, Santa Barbara 4, Santa Clara County 2, Shasta County 1, Redding 1, Solano County 2, Ventura County 11.

Anthrax

One case: Yuba County.

Meningitis (Epidemic)

2 cases: Los Angeles County 1, Los Angeles 1.

Dysentery (Amoebic)

2 cases: Claremont 1, Los Angeles 1.

Dysentery (Bacillary)

8 cases: Los Angeles 7, Santa Clara County 1.

Poliomyelitis

2 cases: Stanislaus County 1, Long Beach 1.

Tetanus

2 cases: Glendale 1, San Francisco 1.

Trachoma

3 cases: Tulare County 1, Visalia 2.

Paratyphoid Fever

One case: Los Angeles.

Food Poisoning

4 cases: Los Angeles County.

Undulant Fever

3 cases: Kern County 1, Los Angeles County 1, Dos Palos 1.

Coccidioid Granuloma

One case: San Diego County.

Septic Sore Throat

2 cases: Pasadena 1, San Bruno 1.

Epilepsy

32 cases: Berkeley 1, Selma 1, Los Angeles County 4, Los Angeles 17, Napa County 2, San Francisco 5, San Joaquin County 1, Burlingame 1.

Rabies (Animal)

8 cases: Long Beach 1, Compton 1, Los Angeles 2, Salinas 1, Riverside County 1, San Diego 2.

University of California
Medical Library,
3rd & Parnassus Aves.,
San Francisco, Calif.



* Cases charged to "California" represent patients ill before entering the State or those who contracted their illness traveling about the State throughout the incubation period of the disease. These cases are not chargeable to any one locality.